

**NC DIVISION MH/DD/SAS
MEDICAID SERVICES AUDIT
2009**

DIAGNOSTIC ASSESSMENT

AUDITOR GUIDELINES

Q1-Q8 Use the following ratings:

- **Rating**
 - **4=** All required elements noted in the question are present
 - **2=** Some required elements noted in the question are present
 - **0=** No required elements noted in the question are present

Q9 AND Q10 – Qualifications and Training

- Review personnel record of staff that provided the service.
- Verify both education and experience, per Core Rules requirements.
- Review education and training documentation for each item listed on the Qualifications Checklist.
- **Rating**
 - **4=**met
 - **0=**not met

Q11– Disclosure of Criminal Conviction

- Review documentation showing the **provider agency required the staff that provided the service to disclose any criminal conviction.**
- Most frequent place to find the disclosure statement is on the employment application or on a separate form/statement filled out during the application process.
- If no disclosure is evident, a criminal record check made prior to the date of service by the provider agency is acceptable,
- If a criminal record check is evident, still ask for evidence of the disclosure. Make a recommendation or assign a POC as appropriate if disclosures are not in place.
- **Rating**
 - **4=** met
 - **0=** not met

Comment Section:

- **Comment on/clarify any questions receiving ratings of 0 or 2.** There needs to be a good/factual explanation for any item rated out of compliance. For example, if Q5 is rated “0”, write “#5” in the Comment Section and explain why it was rated out of compliance. **Do not repeat the question, add specific information regarding why the item was rated 0 or 2.**
- Attach copies of documentation for elements found out of compliance. **All items rated 0 and 2 must have a copy of something attached as evidence, UNLESS it is “not met”**

because it doesn't exist – no PCP at all, or no service note at all. Make sure your comments explain the situation if nothing is attached.

- There are **2nd sheets** available for comments if all comments don't fit on the audit tool. Please use these sheets rather than crowding the bottom of the audit tool.

General Information

- Auditor must complete all sections of the audit sheet and will be responsible for acquiring all needed information.
- Review all tools for completeness before returning any records to the provider.
- Completed audit tools must be reviewed by a team leader prior to copying tools and releasing the provider and their records.
- ENSURE THAT NO **ORIGINAL** AUDIT TOOLS ARE GIVEN TO THE PROVIDER. The audit tools and copies will be 2 different colors.
- **Pink (Plan of Correction) Sheets:**
 - Complete pink (POC) sheets as you go along – if you notice that something is a **systemic issue** as you are auditing, go to the pink sheet and circle the appropriate corrective action.
 - Review pink sheets when audit is complete to ensure that all areas that need corrective action are included.
 - If there is a statement that needs to be made that would not be covered by the corrective action choices, use the General Summary section – this will appear in the report.
 - If there are significant pieces of documentation not provided at the audit, use the statement at the end of the pink sheet to indicate specifically what was missing.
 - Review the required corrective action with the provider.